

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

New Trier Democratic Organization

ADDRESS (number and street)

800 Oak St.

☐ Check if different than previously reported. (ACC)

Winnetka

IL

60093

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00422519

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☒ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Daniel M. Kaplan

Signature of Treasurer

Daniel M. Kaplan

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

New Trier Democratic Organization

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
11 / 27 / 2012 To: M M / D D / Y Y Y Y Y Y
12 / 31 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2012		42889.60
(b) Cash on Hand at Beginning of Reporting Period.....	28726.26	
(c) Total Receipts (from Line 19)	9752.57	76454.46
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	38478.83	119344.06
7. Total Disbursements (from Line 31)	15861.81	96727.04
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	22617.02	22617.02
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

New Trier Democratic Organization

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		2	7		2	0	1	2		

To:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	2		3	1		2	0	1	2		

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

1000.00

42988.08

(ii) Unitemized

35.00

8894.50

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

1035.00

51882.58

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

1035.00

51882.58

12. Transfers From Affiliated/Other

Party Committees.....

580.00

1355.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

790.44

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

8137.57

22426.44

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

8137.57

22426.44

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))..... ▶

9752.57

76454.46

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

1615.00

54028.02

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	5700.57	19915.83
(ii) Non-Federal Share.....	5889.36	24508.68
(b) Other Federal Operating Expenditures	3294.03	13951.16
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	14883.96	58375.67
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	10513.66
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	4202.63
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	977.85	23635.08
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	977.85	23635.08
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	15861.81	96727.04
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9972.45	72218.36

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1035.00	51882.58
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1035.00	51882.58
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	8994.60	33866.99
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	790.44
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	8994.60	33076.55

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New Trier Democratic Organization

Full Name (Last, First, Middle Initial)

A. Philip Corboy

Mailing Address 26 Woodley Rd

City
Winnetka

State Zip Code
IL 60093

FEC ID number of contributing
federal political committee.

C

Name of Employer
Corboy & Associates

Occupation
attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 17 2012

Transaction ID : SA11AI.8784

Amount of Each Receipt this Period

1000.00

Dinner tickets

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1000.00

1000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 23

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

New Trier Democratic Organization

Full Name (Last, First, Middle Initial)

A. OBAMA FOR AMERICA

Mailing Address PO BOX 8102

City
CHICAGOState
ILZip Code
60680FEC ID number of contributing
federal political committee.

C C00431445

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

160.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		04		2012

Transaction ID : SA12.8788

Amount of Each Receipt this Period

80.00

Office phone banking

Full Name (Last, First, Middle Initial)

B. SCHAKOWSKY FOR CONGRESS

Mailing Address P.O. BOX 5130

City
EVANSTONState
ILZip Code
60204FEC ID number of contributing
federal political committee.

C C00327023

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		04		2012

Transaction ID : SA12.8789

Amount of Each Receipt this Period

500.00

Purchase of slate cards

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

580.00

TOTAL This Period (last page this line number only)..... ►

580.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 23

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

New Trier Democratic Organization

Full Name (Last, First, Middle Initial)

A. AT&T

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		28		2012

Mailing Address Bill Payment Center

City	State	Zip Code
Saginaw	MI	48663

Transaction ID : SB21B.8801Purpose of Disbursement
Office telephone bill

001

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

165.07

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. AT&T

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		28		2012

Mailing Address Bill Payment Center

City	State	Zip Code
Saginaw	MI	48663

Transaction ID : SB21B.8821Purpose of Disbursement
Telephone & internet

001

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

191.94

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. Siohban Burke

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2012

Mailing Address 435 Regency Court

City	State	Zip Code
Aurora	IL	60504

Transaction ID : SB21B.8798Purpose of Disbursement
Net salary

001

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

768.11

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1125.12

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 23

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

New Trier Democratic Organization

Full Name (Last, First, Middle Initial)

A. Siohban Burke

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2012

Mailing Address 435 Regency Court

City	State	Zip Code
Aurora	IL	60504

Transaction ID : SB21B.8799Purpose of Disbursement
Net salary - Executive Director

001

Amount of Each Disbursement this Period

Candidate Name

272.22

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. Chase Cards

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		28		2012

Mailing Address PO Box 15153

City	State	Zip Code
Wilmington	DE	19886

Transaction ID : SB21B.8813Purpose of Disbursement
Chase card payment

001

Amount of Each Disbursement this Period

Candidate Name

650.39

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. Dem Store.com

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		28		2012

Mailing Address 5125 MacArthur N.W.--Suite 14

City	State	Zip Code
Washington	DC	20016

Transaction ID : SB21B.8813.1Purpose of Disbursement
Obama bumper stickers

006

Amount of Each Disbursement this Period

Candidate Name

90.47

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input checked="" type="checkbox"/> President

Disbursement For:	2012	<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼	

State: District: 00

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....▶

922.61

TOTAL This Period (last page this line number only).....▶

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

New Trier Democratic Organization

Full Name (Last, First, Middle Initial)

A. TonerandInk Online

Mailing Address PO Box 6151

City Lindenhurst State IL Zip Code 60046

Purpose of Disbursement
Toner

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 28 / 2012
Transaction ID : SB21B.8813.2

Amount of Each Disbursement this Period

52.67

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Office Depot

Mailing Address 2722 Green Bay Rd.

City Evanston State IL Zip Code 60201

Purpose of Disbursement
Paper, toner, shredder

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 28 / 2012
Transaction ID : SB21B.8813.3

Amount of Each Disbursement this Period

259.56

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Constant ContactMailing Address 1601 Trapelo Road
Suite 329

City Waltham State MA Zip Code 02541

Purpose of Disbursement
Email subscription service

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 28 / 2012
Transaction ID : SB21B.8813.4

Amount of Each Disbursement this Period

63.75

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 23

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

New Trier Democratic Organization

Full Name (Last, First, Middle Initial)

A. Constant ContactMailing Address 1601 Trapelo Road
Suite 329

City Waltham State MA Zip Code 02541

Purpose of Disbursement
Email service

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 28 2012**Transaction ID : SB21B.8823.1**

Amount of Each Disbursement this Period

63.75

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Daniel M. Kaplan

Mailing Address 1510 Washington Avenue

City Wilmette State IL Zip Code 60091

Purpose of Disbursement
Net salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 22 2012**Transaction ID : SB21B.8793**

Amount of Each Disbursement this Period

335.06

Full Name (Last, First, Middle Initial)

C. Judith Mandel

Mailing Address 141 Green Bay Road

City Wilmette State IL Zip Code 60091

Purpose of Disbursement
Room rental reimbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 15 2012**Transaction ID : SB21B.8794**

Amount of Each Disbursement this Period

30.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

365.06

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

New Trier Democratic Organization

Full Name (Last, First, Middle Initial)

A. NGP Van, Inc.Mailing Address 1101 15th Street, NW
Suite 500

City Washington State DC Zip Code 20005

Purpose of Disbursement
Software expenses

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 28 / 2012**Transaction ID : SB21B.8811**

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. Winnetka Chamber of Commerce

Mailing Address 841 Spruce St.

City Winnetka State IL Zip Code 60093

Purpose of Disbursement
Annual membership

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 28 / 2012**Transaction ID : SB21B.8804**

Amount of Each Disbursement this Period

275.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

525.00

3294.03

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 23

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New Trier Democratic Organization

Full Name (Last, First, Middle Initial)

A. AT&T

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		28		2012

Mailing Address Bill Payment Center

City	State	Zip Code
Saginaw	MI	48663

Transaction ID : SB30B.8802Purpose of Disbursement
Phone banking

001

Amount of Each Disbursement this Period

Candidate Name

BARACK OBAMACategory/
Type

188.62

Office Sought:

☐ House
☐ Senate
☒ President
 State: District: 00

Disbursement For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼
B. AT&T

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		28		2012

Mailing Address Bill Payment Center

City	State	Zip Code
Saginaw	MI	48663

Transaction ID : SB30B.8822Purpose of Disbursement
Phone bank

001

Amount of Each Disbursement this Period

Candidate Name

BARACK OBAMACategory/
Type

166.92

Office Sought:

☐ House
☐ Senate
☒ President
 State: District: 00

Disbursement For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼
C. Siohban Burke

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		03		2012

Mailing Address 435 Regency Court

City	State	Zip Code
Aurora	IL	60504

Transaction ID : SB30B.8796Purpose of Disbursement
Net salary

001

Amount of Each Disbursement this Period

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President
 State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

339.23

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

694.77

	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

New Trier Democratic Organization

A. United States Treasury

Mailing Address P.O. Box 1269

City	State	Zip Code
Charlotte	NC	28201-1269

Purpose of Disbursement	
withholding & payroll taxes	

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: 2012

☐ Primary ☒ General

☐ Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB30B.8820

Amount of Each Disbursement this Period

283.08

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

[illegible]

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement	
1	2
3	4
5	6
7	8
9	10
11	12
13	14
15	16
17	18
19	20
21	22
23	24
25	26
27	28
29	30
31	32
33	34
35	36
37	38
39	40
41	42
43	44
45	46
47	48
49	50
51	52
53	54
55	56
57	58
59	60
61	62
63	64
65	66
67	68
69	70
71	72
73	74
75	76
77	78
79	80
81	82
83	84
85	86
87	88
89	90
91	92
93	94
95	96
97	98
99	100

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....

283.08

TOTAL This Period (last page this line number only).....

977.85

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 16 OF 23

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

New Trier Democratic Organization

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

AT&T

Nature of Debt (Purpose):
Phone bill

Mailing Address Bill Payment Center

City State

Zip Code

Saginaw

MI

48663

Outstanding Balance Beginning This Period

353.69

Transaction ID : SD10.8781

Amount Incurred This Period

0.00

Payment This Period

353.69

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

NGP Van, Inc.

Nature of Debt (Purpose):
Donor base software

Mailing Address 1101 15th Street, NW

Suite 500

City State

Zip Code

Washington

DC

20005

Outstanding Balance Beginning This Period

250.00

Transaction ID : SD10.8777

Amount Incurred This Period

0.00

Payment This Period

250.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

North Shore Printers

Nature of Debt (Purpose):
Printing of slate cards and envelopes

Mailing Address 535 S Sheridan Rd

City

State

Zip Code

Waukegan

IL

60085

Outstanding Balance Beginning This Period

1104.38

Transaction ID : SD10.8678

Amount Incurred This Period

0.00

Payment This Period

1104.38

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

0.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 17 OF 23

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

New Trier Democratic Organization

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

North Shore Printers

Nature of Debt (Purpose):
Election mailing

Mailing Address 535 S Sheridan Rd

City State

Zip Code

Waukegan

IL

60085

Outstanding Balance Beginning This Period

2610.22

Transaction ID : SD10.8677

Amount Incurred This Period

0.00

Payment This Period

2610.22

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

North Shore Printers

Nature of Debt (Purpose):
Slate card printing

Mailing Address 535 S Sheridan Rd

City State

Zip Code

Waukegan

IL

60085

Outstanding Balance Beginning This Period

1974.46

Transaction ID : SD10.8773

Amount Incurred This Period

0.00

Payment This Period

1974.46

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Renaissance Hotel

Nature of Debt (Purpose):
Annual dinner

Mailing Address 933 Skokie Blvd

City

State

Zip Code

Northbrook

IL

60062

Outstanding Balance Beginning This Period

4721.90

Transaction ID : SD10.8772

Amount Incurred This Period

0.00

Payment This Period

4721.90

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional)..... ►

0.00

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 18 OF 23

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

New Trier Democratic Organization

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Winnetka Chamber of Commerce

Nature of Debt (Purpose):

Annual dues

Mailing Address 841 Spruce St.

City State

Zip Code

Winnetka

IL

60093

Outstanding Balance Beginning This Period

275.00

Transaction ID : SD10.8780

Amount Incurred This Period

0.00

Payment This Period

275.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

0.00

2) **TOTALS** This Period (last page this line number only)..... ►

0.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 19 OF 23

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)
 New Trier Democratic Organization

NAME OF ACCOUNT

New Trier Democratic Organization

DATE OF RECEIPT

M M	/	D D	/	Y Y Y Y
11		30		2012

TOTAL AMOUNT TRANSFERRED

838.80

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

838.80

Transaction ID : H3.8790

ii) Generic Voter Drive

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Fundraising

v) Direct Candidate Support (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC)

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred).....

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 20 OF 23

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)
 New Trier Democratic Organization

NAME OF ACCOUNT
 New Trier Democratic Organization

DATE OF RECEIPT

M M / D D / Y Y Y Y Y Y
 12 / 03 / 2012

TOTAL AMOUNT TRANSFERRED

5353.53

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

1137.60

Transaction ID : H3.8791

ii) Generic Voter Drive

iii) Exempt Activities.....

4215.93

Transaction ID : H3.8791.0

iv) Direct Fundraising (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Fundraising

v) Direct Candidate Support (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC)

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred).....

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 21 OF 23

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)
 New Trier Democratic Organization

NAME OF ACCOUNT
 New Trier Democratic Organization

DATE OF RECEIPT

M M / D D / Y Y Y Y Y
 12 / 13 / 2012

TOTAL AMOUNT TRANSFERRED

1945.24

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

0.00

Transaction ID : H3.8792

ii) Generic Voter Drive

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) New Trier Annual Dinner (10/16/2011)

1945.24

Transaction ID : H3.8792.0

b)

c) Total Amount Transferred For Direct Fundraising

1945.24

v) Direct Candidate Support (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC)

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

1976.40

TOTAL This Period (Generic Voter Drive)

0.00

TOTAL This Period (Exempt Activities)

4215.93

TOTAL This Period (Direct Fundraising)

1945.24

TOTAL This Period (Direct Candidate Support)

0.00

TOTAL This Period (Public Communications Referring Only to Party)

0.00

TOTAL This Period (Total Amount Transferred).....

8137.57

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 22 OF 23

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New Trier Democratic Organization

A. Full Name (Last, First, Middle Initial) Schermerhorn & Co			Transaction ID : H4.8800			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2737 Central Street								
City Evanston		State IL		Zip Code 60201				
Purpose of Disbursement:				Category/ Type		Allocated Activity or Event Year-To-Date 23667.55		
Activity or Event Identifier: Administrative						Date <input type="text" value="12"/> / <input type="text" value="04"/> / <input type="text" value="2012"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
<input type="text" value="326.20"/>				<input type="text" value="838.80"/>				<input type="text" value="1165.00"/>

B. Full Name (Last, First, Middle Initial) Renaissance Hotel			Transaction ID : H4.8803			Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 933 Skokie Blvd								
City Northbrook		State IL		Zip Code 60062				
Purpose of Disbursement: Annual dinner & joint fundraiser				Category/ Type		Allocated Activity or Event Year-To-Date 14378.78		
Activity or Event Identifier: New Trier Annual Dinner(10/16/2011)						Date <input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2012"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
<input type="text" value="3777.52"/>				<input type="text" value="944.38"/>				<input type="text" value="4721.90"/>

C. Full Name (Last, First, Middle Initial) North Shore Printers			Transaction ID : H4.8806			Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input checked="" type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 535 S Sheridan Rd								
City Waukegan		State IL		Zip Code 60085				
Purpose of Disbursement: Election mailing & slate card printing				Category/ Type		Allocated Activity or Event Year-To-Date 1779.53		
Activity or Event Identifier: Exempt()						Date <input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2012"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
<input type="text" value="309.23"/>				<input type="text" value="795.15"/>				<input type="text" value="1104.38"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="4412.95"/>		<input type="text" value="2578.33"/>		<input type="text" value="6991.28"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<input type="text"/>		<input type="text"/>		<input type="text"/>

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 23 OF 23

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New Trier Democratic Organization

A. Full Name (Last, First, Middle Initial) North Shore Printers		Transaction ID : H4.8808		Allocated Activity or Event:	
Mailing Address 535 S Sheridan Rd				<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input checked="" type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City Waukegan	State IL	Zip Code 60085		Allocated Activity or Event Year-To-Date 4389.75	
Purpose of Disbursement: Election mailing for slate		001		Date 11 / 28 / 2012	
Activity or Event Identifier: Exempt()		Category/ Type			
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
730.86			1879.36		2610.22

B. Full Name (Last, First, Middle Initial) North Shore Printers		Transaction ID : H4.8810		Allocated Activity or Event:	
Mailing Address 535 S Sheridan Rd				<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input checked="" type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City Waukegan	State IL	Zip Code 60085		Allocated Activity or Event Year-To-Date 6364.21	
Purpose of Disbursement: Printing of slate cards		001		Date 11 / 28 / 2012	
Activity or Event Identifier: Exempt()		Category/ Type			
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
552.85			1421.61		1974.46

C. Full Name (Last, First, Middle Initial) North Shore Printers		Transaction ID : H4.8812		Allocated Activity or Event:	
Mailing Address 535 S Sheridan Rd				<input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input checked="" type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City Waukegan	State IL	Zip Code 60085		Allocated Activity or Event Year-To-Date 6378.18	
Purpose of Disbursement: Slate card printing		001		Date 11 / 28 / 2012	
Activity or Event Identifier: Exempt()		Category/ Type			
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.91			10.06		13.97

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1287.62		3311.03		4598.65

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
5700.57	5889.36	11589.93